2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000769

FILED Sep 14, 2007 Secretary of State

Entity Name: SPACE COAST VIPER BASEBALL/SOFTBALL BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

6150 BANYAN ST. COCOA, FL 32927

Current Mailing Address: New Mailing Address:

6150 BANYAN ST. COCOA, FL 32927

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KILGALLON, CINDY
7645 FRINGE PL.
COCOA, FL 32927 US
SMITH, THOMAS R
6970 MARVIN AVE
COCOA, FL 32927 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: THOMAS R SMITH 09/14/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP () Delete Title: PRES (X) Change () Addition Name: SMITH, T.R. Name: SMITH, T.R.

 Address:
 6970 MARVIN AVE
 Address:
 6970 MARVIN AVE

 City-St-Zip:
 COCOA, FL 32927
 City-St-Zip:
 COCOA, FL 32927

Title: DS () Delete Title: DS (X) Change () Addition Name: KILGALLON, CINDY Name: JUDY, ELKINS

 Name:
 Name:
 30DT, EERING

 Address:
 6150 BANYAN ST.
 Address:
 6150 BANYAN ST.

 City-St-Zip:
 COCOA, FL 32927
 City-St-Zip:
 COCOA, FL 32927

 Name:
 FISHER, MARIA
 Name:
 CLARK, MELISSA

 Address:
 4620 SUGARTOWN ST.
 Address:
 6150 BANYAN ST.

 City-St-Zip:
 COCOA, FL 32927
 City-St-Zip:
 COCOA, FL 32927

Title: CM () Delete Title: () Change () Addition
Name: DAVIS. KARI Name:

 DAVIS, KARI
 Name:

 4095 VANCOUVER AVE.
 Address:

 COCOA, FL 32926
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS R SMITH PRES 09/14/2007